

basis, the services of personnel of any such department or agency.

(b) **EXPENSES.**—The expenses of the committee for the period March 1, 1999, through September 30, 1999, under this section shall not exceed \$708,185, of which amount not to exceed \$15,000, may be expended for the procurement of the services of individual consultants, or organizations thereof (as authorized by section 202(i) of the Legislative Reorganization Act of 1946).

SEC. 18. SELECT COMMITTEE ON INTELLIGENCE.

(a) **GENERAL AUTHORITY.**—In carrying out its powers, duties, and functions under S. Res. 400, agreed to May 19, 1976 (94th Congress), in accordance with its jurisdiction under section 3(a) of that resolution, including holding hearings, reporting such hearings, and making investigations as authorized by section 5 of that resolution, the Select Committee on Intelligence is authorized from March 1, 1999, through September 30, 1999, in its discretion—

(1) to make expenditures from the contingent fund of the Senate;

(2) to employ personnel; and

(3) with the prior consent of the Government department or agency concerned and the Committee on Rules and Administration to use, on a reimbursable or nonreimbursable basis, the services of personnel of any such department or agency.

(b) **EXPENSES.**—The expenses of the committee for the period March 1, 1999, through September 30, 1999, under this section shall not exceed \$1,325,017, of which amount not to exceed \$35,000, may be expended for the procurement of the services of individual consultants, or organizations thereof (as authorized by section 202(i) of the Legislative Reorganization Act of 1946).

SEC. 19. COMMITTEE ON INDIAN AFFAIRS.

(a) **GENERAL AUTHORITY.**—In carrying out the duties and functions imposed by section 105 of S. Res. 4, agreed to February 4, 1977 (Ninety-fifth Congress), and in exercising the authority conferred on it by that section, the Committee on Indian Affairs is authorized from March 1, 1999, through September 30, 1999, in its discretion—

(1) to make expenditures from the contingent fund of the Senate;

(2) to employ personnel; and

(3) with the prior consent of the Government department or agency concerned and the Committee on Rules and Administration to use, on a reimbursable or nonreimbursable basis, the services of personnel of any such department or agency.

(b) **EXPENSES.**—The expenses of the committee for the period March 1, 1999, through September 30, 1999, under this section shall not exceed \$712,580, of which amount not to exceed \$40,000, may be expended for the procurement of the services of individual consultants, or organizations thereof (as authorized by section 202(i) of the Legislative Reorganization Act of 1946).

SEC. 20. SPECIAL RESERVES.

(a) **IN GENERAL.**—

(1) **ESTABLISHMENT.**—Of the funds authorized for the Senate committees listed in sections 3 through 21 by S. Res. 54, agreed to February 13, 1997 (105th Congress), for the funding period ending on the last day of February 1999, any unexpended balances remaining shall be transferred to a special reserve which shall, on the basis of a special need and at the request of a Chairman and Ranking Member of any such committee, and with the approval of the Chairman and Ranking Member of the Committee on Rules and Administration, be available to any committee for the purposes provided in subsection (b).

(2) **PAYMENT OF INCURRED OBLIGATIONS.**—During March 1999, obligations incurred but not paid by February 28, 1999, shall be paid from the unexpended balances of committees before transfer to the special reserves and any obligations so paid shall be deducted from the unexpended balances of committees before being transferred to the special reserves.

(b) **PURPOSES.**—The reserves established in subsection (a) shall be available for the period commencing March 1, 1999, and ending with the close of September 30, 1999, for the purpose of—

(1) meeting any unpaid obligations incurred during the funding period ending on the last day of February 1999, and which were not deducted from the unexpended balances under subsection (a); and

(2) meeting expenses incurred after such last day and prior to the close of September 30, 1999.

AMENDMENTS SUBMITTED

SOLDIERS', SAILORS', AIRMEN'S, AND MARINES' BILL OF RIGHTS ACT OF 1999

BOND AMENDMENT NO. 20

(Ordered to lie on the table.)

Mr. BOND submitted an amendment intended to be proposed by him to the bill (S. 4) to improve pay and retirement equity for members of the Armed Forces; and for other purposes; as follows:

On page 46, after line 16, add the following:

TITLE V—OTHER BENEFITS

SECTION 501. MEDICARE PART B SPECIAL ENROLLMENT PERIOD AND WAIVER OF PART B LATE ENROLLMENT PENALTY AND MEDIGAP SPECIAL OPEN ENROLLMENT PERIOD FOR CERTAIN MILITARY RETIREES AND DEPENDENTS.

(a) **MEDICARE PART B SPECIAL ENROLLMENT PERIOD; WAIVER OF PART B PENALTY FOR LATE ENROLLMENT.**—

(1) **IN GENERAL.**—In the case of any eligible individual (as defined in subsection (c)), the Secretary of Health and Human Services shall provide for a special enrollment period during which the individual may enroll under part B of title XVIII of the Social Security Act (42 U.S.C. 1395j et seq.). Such period shall be for a period of 6 months and shall begin with the first month that begins at least 45 days after the date of enactment of this Act.

(2) **COVERAGE PERIOD.**—In the case of an eligible individual who enrolls during the special enrollment period provided under paragraph (1), the coverage period under part B of title XVIII of the Social Security Act shall begin on the first day of the month following the month in which the individual enrolls.

(3) **WAIVER OF PART B LATE ENROLLMENT PENALTY.**—In the case of an eligible individual who enrolls during the special enrollment period provided under paragraph (1), there shall be no increase pursuant to section 1839(b) of the Social Security Act (42 U.S.C. 1395r(b)) in the monthly premium under part B of title XVIII of such Act.

(b) **MEDIGAP SPECIAL OPEN ENROLLMENT PERIOD.**—Notwithstanding any other provision of law, an issuer of a medicare supplemental policy (as defined in section 1882(g) of the Social Security Act (42 U.S.C. 1395ss))—

(1) may not deny or condition the issuance or effectiveness of a medicare supplemental policy; and

(2) may not discriminate in the pricing of the policy on the basis of the individual's health status, medical condition (including both physical and mental illnesses), claims experience, receipt of health care, medical history, genetic information, evidence of insurability (including conditions arising out of acts of domestic violence), or disability; in the case of an eligible individual who seeks to enroll during the 6-month period described in subsection (a)(1).

(c) **ELIGIBLE INDIVIDUAL DEFINED.**—In this section, the term "eligible individual" means an individual—

(1) who, as of the date of the enactment of this Act, has attained 65 years of age and was eligible to enroll under part B of title XVIII of the Social Security Act, and

(2) who at the time the individual first satisfied paragraph (1) or (2) of section 1836 of the Social Security Act (42 U.S.C. 1395o)—

(A) was a covered beneficiary (as defined in section 1072(5) of title 10, United States Code), and

(B) did not elect to enroll (or to be deemed enrolled) under section 1837 of the Social Security Act (42 U.S.C. 1395p) during the individual's initial enrollment period.

The Secretary of Health and Human Services shall consult with the Secretary of Defense in the identification of eligible individuals.

ROCKEFELLER (AND BINGAMAN) AMENDMENT NO. 21

Mr. ROCKEFELLER (for himself and Mr. BINGAMAN) proposed an amendment to the bill, S. 4, supra; as follows:

On page 46, between the matter following line 5 and line 6, insert the following:

SEC. 305. AVAILABILITY OF MONTGOMERY GI BILL BENEFITS FOR PREPARATORY COURSES FOR COLLEGE AND GRADUATE SCHOOL ENTRANCE EXAMS.

For purposes of section 3002(3) of title 38, United States Code, the term "program of education" shall include the following:

(1) A preparatory course for a test that is required or utilized for admission to an institution of higher education.

(2) A preparatory course for test that is required or utilized for admission to a graduate school.

WARNER (AND ALLARD) AMENDMENT NO. 22

Mr. WARNER (for himself and Mr. ALLARD) proposed an amendment to the bill, S. 4, supra; as follows:

On page 21, line 19, insert "2000," after "JANUARY 1,"

On page 21, line 23, strike out "(1)".

Beginning on page 22, in the table under the heading "COMMISSIONED OFFICERS WITH OVER 4 YEARS OF ACTIVE DUTY SERVICE AS AN ENLISTED MEMBER OR WARRANT OFFICER", strike out the superscript "4" each place it appears in the column under the heading "Pay Grade".

Beginning on page 27, line 25, strike out "the Secretary of Health and Human Services" and all that follows through "Administration," on page 28, line 4.

HARKIN (AND BINGAMAN) AMENDMENT NO. 23

Mr. HARKIN (for himself and Mr. BINGAMAN) proposed an amendment to the bill, S. 4, supra; as follows:

On page 25, strike lines 10 through 15, and insert the following:

(b)(1), the Secretary concerned shall pay the member a special subsistence allowance for each month for which the member is eligible to receive food stamp assistance, as determined by the Secretary.

“(b) COVERED MEMBERS.—(1) A member referred to subsection (a) is an enlisted member in pay grade E-5 or below.

“(2) For the purposes of this section, a member shall be considered as being eligible to receive food stamp assistance if the household of the member meets the income standards of eligibility established under section 5(c)(2) of the Food Stamp Act of 1977 (7 U.S.C. 2014(c)(2)), not taking into account the special subsistence allowance that may be payable to the member under this section and any allowance that is payable to the member under section 403 or 404a of this title.

On page 28, between lines 8 and 9, insert the following:

SEC. 104. IMPLEMENTATION OF THE SPECIAL SUPPLEMENTAL NUTRITION PROGRAM.

(a) CLARIFICATION OF BENEFITS RESPONSIBILITY.—Subsection (a) of section 1060a of title 10, United States Code, is amended by striking “may carry out a program to provide special supplemental food benefits” and inserting “shall carry out a program to provide supplemental foods and nutrition education”.

(b) RELATIONSHIP TO WIC PROGRAM.—Subsection (b) of such section is amended to read as follows:

“(b) FEDERAL PAYMENTS.—For the purpose of providing supplemental foods under the program required under subsection (a), the Secretary of Agriculture shall make available to the Secretary of Defense for each of fiscal years 1999 through 2003, out of funds available for such fiscal year pursuant to the authorization of appropriations under section 17(g)(1) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(g)(1)), \$10,000,000 plus such additional amount as is necessary to provide supplemental foods under the program for such fiscal year. The Secretary of Defense shall use funds available for the Department of Defense to provide nutrition education and to pay for costs for nutrition services and administration under the program.”.

(c) PROGRAM ADMINISTRATION.—Subsection (c)(1)(A) of such section is amended by adding at the end the following: “In the determining of eligibility for the program benefits, a person already certified for participation in the special supplemental nutrition program for women, infants, and children under section 17 of the Child Nutrition Act of 1966 (42 U.S.C. 1786) shall be considered eligible for the duration of the certification period under that program.”.

(d) NUTRITIONAL RISK STANDARDS.—Subsection (c)(1)(B) of such section is amended by inserting “and nutritional risk standards” after “income eligibility standards”.

(e) DEFINITIONS.—Subsection (f) of such section is amended by adding at the end the following:

“(4) The terms ‘costs for nutrition services and administration’, ‘nutrition education’ and ‘supplemental foods’ have the meanings given the terms in paragraphs (4), (7), and (14), respectively, of section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)).”.

(f) REPORT.—Not later than March 1, 2001, the Secretary of Defense, in consultation with the Secretary of Agriculture, shall submit to Congress a report on the implementation of the special supplemental food pro-

gram required under section 1060a of title 10, United States Code. The report shall include a discussion of whether the amount required to be provided by the Secretary of Agriculture for supplemental foods under subsection (b) of that section is adequate for the purpose and, if not, an estimate of the amount necessary to provide supplemental foods under the program.

BINGAMAN AMENDMENT NO. 24

Mr. BINGAMAN proposed an amendment to the bill, S. 4, supra; as follows:

On page 46, after line 16, add the following:

TITLE V—MISCELLANEOUS

SEC. 501. SENSE OF SENATE REGARDING PROCESSING OF CLAIMS FOR VETERANS' BENEFITS.

(a) FINDINGS.—The Senate makes the following findings:

(1) Despite advances in technology, telecommunications, and training, the Department of Veterans Affairs currently requires 20 percent more time to process claims for veterans' benefits than the Department required to process such claims in 1997.

(2) The Department does not currently process claims for veterans' benefits in a timely manner.

(b) SENSE OF SENATE.—It is the sense of the Senate to urge the Secretary of Veterans Affairs to—

(1) review the program, policies, and procedures of the Veterans Benefits Administration in order to identify areas in which the Administration does not currently process claims for veterans' benefits in a manner consistent with the objectives set forth in the National Performance Review (including objectives regarding timeliness of Executive branch activities); and

(2) initiate any actions necessary to ensure that the Administration processes claims for such benefits in a manner consistent with such objectives.

(3) report to the Congress by June 1, 1999 on measures taken to improve processing time for veterans' claims.

FEINGOLD AMENDMENT NO. 25

Ms. LANDRIEU (for Mr. FEINGOLD) proposed an amendment to the bill, S. 4, supra; as follows:

On page 28, between lines 8 and 9, insert the following:

SEC. 104. ENTITLEMENT OF RESERVES NOT ON ACTIVE DUTY TO RECEIVE SPECIAL DUTY ASSIGNMENT PAY.

(a) AUTHORITY.—Section 307(a) of title 37, United States Code, is amended by inserting after “is entitled to basic pay” in the first sentence the following: “, or is entitled to compensation under section 206 of this title in the case of a member of a reserve component not on active duty.”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect on the first day of the first month that begins on or after the date of the enactment of this Act.

ROCKEFELLER (AND OTHERS) AMENDMENT NO. 26

Mr. ROCKEFELLER (for himself, Mr. WELLSTONE, Mr. KENNEDY, Mr. GRAMS, Mr. ASHCROFT, Mr. REID, Mr. KERRY, Mr. SPECTER, Mr. JEFFORDS, and Mr. DASCHLE) proposed an amendment to the bill, S. 4, supra; as follows:

On page 46, after line 16, add the following:

SEC. ____ . MEDICARE SUBVENTION DEMONSTRATION PROJECT FOR VETERANS.

Title XVIII of the Social Security Act (42 U.S.C. 1395 et seq.) is amended by adding at the end the following:

“MEDICARE SUBVENTION DEMONSTRATION PROJECT FOR VETERANS

“SEC. 1897. (a) DEFINITIONS.—In this section:

“(1) ADMINISTERING SECRETARIES.—The term ‘administering Secretaries’ means the Secretary and the Secretary of Veterans Affairs acting jointly.

“(2) DEMONSTRATION PROJECT; PROJECT.—The terms ‘demonstration project’ and ‘project’ mean the demonstration project carried out under this section.

“(3) DEMONSTRATION SITE.—The term ‘demonstration site’ means a Veterans Affairs medical facility, including a group of Veterans Affairs medical facilities that provide hospital care or medical services as part of a service network or similar organization.

“(4) MILITARY RETIREE.—The term ‘military retiree’ means a member or former member of the Armed Forces who is entitled to retired pay.

“(5) TARGETED MEDICARE-ELIGIBLE VETERAN.—The term ‘targeted medicare-eligible veteran’ means an individual who—

“(A) is a veteran (as defined in section 101(2) of title 38, United States Code) and is described in section 1710(a)(3) of title 38, United States Code;

“(B) has attained age 65;

“(C) is entitled to benefits under part A of this title; and

“(D)(i) is enrolled for benefits under part B of this title; and

“(ii) if such individual attained age 65 before the date of enactment of the Veterans' Equal Access to Medicare Act, was so enrolled on such date.

“(6) TRUST FUNDS.—The term ‘trust funds’ means the Federal Hospital Insurance Trust Fund established in section 1817 and the Federal Supplementary Medical Insurance Trust Fund established in section 1841.

“(7) VETERANS AFFAIRS MEDICAL FACILITY.—The term ‘Veterans Affairs medical facility’ means a medical facility as defined in section 8101 of title 38, United States Code.

“(b) DEMONSTRATION PROJECT.—

“(1) IN GENERAL.—

“(A) ESTABLISHMENT.—The administering Secretaries are authorized to establish a demonstration project (under an agreement entered into by the administering Secretaries) under which the Secretary shall reimburse the Secretary of Veterans Affairs, from the trust funds, for medicare health care services furnished to certain targeted medicare-eligible veterans at a demonstration site.

“(B) AGREEMENT.—The agreement entered into under subparagraph (A) shall include at a minimum—

“(i) a description of the benefits to be provided to the participants in the demonstration project established under this section;

“(ii) a description of the eligibility rules for participation in the demonstration project, including any terms and conditions established under subparagraph (C) and any cost-sharing required under subparagraph (D);

“(iii) a description of how the demonstration project will satisfy the requirements under this title (including beneficiary protections and quality assurance mechanisms);

“(iv) a description of the demonstration sites selected under paragraph (2);

“(v) a description of how reimbursement and maintenance of effort requirements under subsection (h) will be implemented in the demonstration project;

“(vi) a statement that the Secretary shall have access to all data of the Department of Veterans Affairs that the Secretary determines is necessary to conduct independent estimates and audits of the maintenance of effort requirement, the annual reconciliation, and related matters required under the demonstration project;

“(vii) a description of any requirement that the Secretary waives pursuant to subsection (d); and

“(viii) a certification, provided after review by the administering Secretaries, that any entity that is receiving payments by reason of the demonstration project has sufficient—

“(I) resources and expertise to provide, consistent with payments under subsection (h), the full range of benefits required to be provided to beneficiaries under the project; and

“(II) information and billing systems in place to ensure the accurate and timely submission of claims for benefits and to ensure that providers of services, physicians, and other health care professionals are reimbursed by the entity in a timely and accurate manner.

“(C) VOLUNTARY PARTICIPATION.—Participation of targeted medicare-eligible veterans in the demonstration project shall be voluntary, subject to the capacity of participating demonstration sites and the funding limitations specified in subsection (h), and shall be subject to such terms and conditions as the administering Secretaries may establish. In the case of a demonstration site described in paragraph (2)(C)(i), targeted medicare-eligible veterans who are military retirees shall be given preference for participating in the project conducted at that site.

“(D) COST-SHARING.—The Secretary of Veterans Affairs may establish cost-sharing requirements for veterans participating in the demonstration project. If such cost-sharing requirements are established, those requirements shall be the same as the requirements that apply to targeted medicare-eligible patients at medical centers that are not Veterans Affairs medical facilities.

“(E) DATA MATCH.—

“(i) ESTABLISHMENT OF DATA MATCHING PROGRAM.—The administering Secretaries shall establish a data matching program under which there is an exchange of information of the Department of Veterans Affairs and of the Department of Health and Human Services as is necessary to identify veterans (as defined in section 101(2) of title 38, United States Code) who are entitled to benefits under part A or enrolled under part B, or both, in order to carry out this section. The provisions of section 552a of title 5, United States Code, shall apply with respect to such matching program only to the extent the administering Secretaries find it feasible and appropriate in carrying out this section in a timely and efficient manner.

“(ii) PERFORMANCE OF DATA MATCH.—The administering Secretaries, using the data matching program established under clause (i), shall perform a comparison in order to identify veterans who are entitled to benefits under part A or enrolled under part B, or both. To the extent such Secretaries deem appropriate to carry out this section, the comparison and identification may distinguish among such veterans by category of veterans, by entitlement to benefits under this title, or by other characteristics.

“(iii) DEADLINE FOR FIRST DATA MATCH.—Not later than October 31, 1999, the administering Secretaries shall first perform a comparison under clause (ii).

“(iv) CERTIFICATION BY INSPECTOR GENERAL.—

“(I) IN GENERAL.—The administering Secretaries may not conduct the program unless the Inspector General of the Department of Health and Human Services certifies to Congress that the administering Secretaries have established the data matching program under clause (i) and have performed a comparison under clause (ii).

“(II) DEADLINE FOR CERTIFICATION.—Not later than December 15, 1999, the Inspector General of the Department of Health and Human Services shall submit a report to Congress containing the certification under subclause (I) or the denial of such certification.

“(2) NUMBER OF DEMONSTRATION SITES.—

“(A) IN GENERAL.—Subject to subparagraphs (B) and (C), and subsection (g)(1)(D)(ii), the administering Secretaries shall establish a plan for the selection of up to 10 demonstration sites located in geographically dispersed locations to participate in the project.

“(B) CRITERIA.—The administering Secretaries shall favor selection of those demonstration sites that consideration of the following factors indicate are suited to serve targeted medicare-eligible veterans:

“(i) There is a high potential demand by targeted medicare-eligible veterans for the services to be provided at the demonstration site.

“(ii) The demonstration site has sufficient capability in billing and accounting to participate in the project.

“(iii) The demonstration site can demonstrate favorable indicators of quality of care, including patient satisfaction.

“(iv) The demonstration site delivers a range of services required by targeted medicare-eligible veterans.

“(v) The demonstration site meets other relevant factors identified in the plan.

“(C) REQUIRED DEMONSTRATION SITES.—At least 1 of each of the following demonstration sites shall be selected for inclusion in the demonstration project:

“(i) DEMONSTRATION SITE NEAR CLOSED BASE.—A demonstration site that is in the same catchment area as a military treatment facility referred to in section 1074(a) of title 10, United States Code, which was closed pursuant to either—

“(I) the Defense Base Closure and Realignment Act of 1990 (part A of title XXIX of Public Law 101-510; 10 U.S.C. 2687 note); or

“(II) title II of the Defense Authorization Amendments and Base Closure and Realignment Act (Public Law 100-526; 10 U.S.C. 2687 note).

“(ii) DEMONSTRATION SITE IN A RURAL AREA.—A demonstration site that serves a predominantly rural population.

“(3) RESTRICTION.—No new buildings may be built or existing buildings expanded with funds from the demonstration project.

“(4) DURATION.—The administering Secretaries shall conduct the demonstration project during the 3-year period beginning on January 1, 2000.

“(c) CREDITING OF PAYMENTS.—A payment received by the Secretary of Veterans Affairs under the demonstration project shall be credited to the applicable Department of Veterans Affairs medical appropriation and (within that appropriation) to funds that have been allotted to the demonstration site that furnished the services for which the

payment is made. Any such payment received during a fiscal year for services provided during a prior fiscal year may be obligated by the Secretary of Veterans Affairs during the fiscal year during which the payment is received.

“(d) AUTHORITY TO WAIVE CERTAIN MEDICARE REQUIREMENTS.—

“(1) IN GENERAL.—Except as provided in paragraph (2), the Secretary may, to the extent necessary to carry out the demonstration project, waive any requirement under this title.

“(2) BENEFICIARY PROTECTIONS FOR MANAGED CARE PLANS.—In the case of a managed care plan established by the Secretary of Veterans Affairs pursuant to subsection (g), such plan shall comply with the requirements of part C of this title that relate to beneficiary protections and other matters, including such requirements relating to the following areas:

“(A) Enrollment and disenrollment.

“(B) Nondiscrimination.

“(C) Information provided to beneficiaries.

“(D) Cost-sharing limitations.

“(E) Appeal and grievance procedures.

“(F) Provider participation.

“(G) Access to services.

“(H) Quality assurance and external review.

“(I) Advance directives.

“(J) Other areas of beneficiary protections that the Secretary determines are applicable to such project.

“(3) DESCRIPTION OF WAIVER.—If the Secretary waives any requirement pursuant to paragraph (1), the Secretary shall include a description of such waiver in the agreement described in subsection (b)(1)(B).

“(e) INSPECTOR GENERAL.—Nothing in the agreement entered into under subsection (b) shall limit the Inspector General of the Department of Health and Human Services from investigating any matters regarding the expenditure of funds under this title for the demonstration project, including compliance with the provisions of this title and all other relevant laws.

“(f) REPORT.—At least 60 days prior to the commencement of the demonstration project, the administering Secretaries shall submit a copy of the agreement entered into under subsection (b) to the committees of jurisdiction in Congress.

“(g) MANAGED HEALTH CARE.—

“(1) MANAGED HEALTH CARE PLANS.—

“(A) IN GENERAL.—The Secretary of Veterans Affairs may establish and operate managed health care plans at demonstration sites.

“(B) REQUIREMENTS.—Any managed health care plan established in accordance with subparagraph (A) shall be operated by or through a Veterans Affairs medical facility, or a group of Veterans Affairs medical facilities, and may include the provision of health care services by public and private entities under arrangements made between the Department of Veterans Affairs and the other public or private entity concerned. Any such managed health care plan shall be established and operated in conformance with standards prescribed by the administering Secretaries.

“(C) MINIMUM BENEFITS.—The administering Secretaries shall prescribe the minimum health care benefits to be provided under a managed health care plan to veterans enrolled in the plan, which benefits shall include at least all health care services covered under the medicare program under this title.

“(D) INCLUSION IN NUMBER OF DEMONSTRATION SITES.—

“(i) IN GENERAL.—Subject to clause (ii), if the Secretary of Veterans Affairs elects to establish a managed health care plan under this section, the establishment of such plan is a selected demonstration site for purposes of applying the numerical limitation under subsection (b)(2).

“(ii) LIMITATION.—The Secretary of Veterans Affairs shall not establish more than 4 managed health care plans under this section.

“(2) DEMONSTRATION SITE REQUIREMENTS.—The Secretary of Veterans Affairs may establish a managed health care plan under paragraph (1) using 1 or more demonstration sites and other public or private entities only after the Secretary of Veterans Affairs submits to Congress a report setting forth a plan for the use of such sites and entities. The plan may not be implemented until the Secretary of Veterans Affairs has received from the Inspector General of the Department of Veterans Affairs, and has forwarded to Congress, certification of each of the following:

“(A) The cost accounting system of the Veterans Health Administration (currently known as the Decision Support System) is operational and is providing reliable cost information on care delivered on an inpatient and outpatient basis at such sites and entities.

“(B) The demonstration sites and entities have developed a credible plan (on the basis of market surveys, data from the Decision Support System, actuarial analysis, or other appropriate methods and taking into account the level of payment under subsection (h) and the costs of providing covered services at the sites and entities) to minimize, to the extent feasible, the risk that appropriated funds allocated to the sites and entities will be required to meet the obligation of the sites and entities to targeted medicare-eligible veterans under the demonstration project.

“(C) The demonstration sites and entities collectively have available capacity to provide the contracted benefits package to a sufficient number of targeted medicare-eligible veterans.

“(D) The Veterans Affairs medical facility administering the health plan has sufficient systems and safeguards in place to minimize any risk that instituting the managed care model will result in reducing the quality of care delivered to participants in the demonstration project or to other veterans receiving care under paragraph (1) or (2) of section 1710(a) of title 38, United States Code.

“(3) RESERVES.—The Secretary of Veterans Affairs shall maintain such reserves as may be necessary to ensure against the risk that appropriated funds, allocated to demonstration sites and public or private entities participating in the demonstration project through a managed health care plan under this section, will be required to meet the obligations of those sites and entities to targeted medicare-eligible veterans.

“(h) PAYMENTS BASED ON REGULAR MEDICARE PAYMENT RATES.—

“(1) PAYMENTS.—

“(A) IN GENERAL.—Subject to the succeeding provisions of this subsection, the Secretary shall reimburse the Secretary of Veterans Affairs for services provided under the demonstration project at the following rates:

“(i) NONCAPITATION.—Except as provided in clause (ii) and subject to subparagraphs (B) and (D), at a rate equal to 95 percent of the amounts that otherwise would be payable under this title on a noncapitated basis for

such services if the demonstration site was not part of this demonstration project, was participating in the medicare program, and imposed charges for such services.

“(ii) CAPITATION.—Subject to subparagraphs (B) and (D), in the case of services provided to an enrollee under a managed health care plan established under subsection (g), at a rate equal to 95 percent of the amount paid to a Medicare+Choice organization under part C with respect to such an enrollee.

“(iii) OTHER CASES.—In cases in which a payment amount may not otherwise be readily computed under clauses (i) or (ii), the Secretaries shall establish rules for computing equivalent or comparable payment amounts.

“(B) EXCLUSION OF CERTAIN AMOUNTS.—In computing the amount of payment under subparagraph (A), the following shall be excluded:

“(i) DISPROPORTIONATE SHARE HOSPITAL ADJUSTMENT.—Any amount attributable to an adjustment under section 1886(d)(5)(F) of the Social Security Act (42 U.S.C. 1395ww(d)(5)(F)).

“(ii) DIRECT GRADUATE MEDICAL EDUCATION PAYMENTS.—Any amount attributable to a payment under subsection (h) of such section.

“(iii) PERCENTAGE OF INDIRECT MEDICAL EDUCATION ADJUSTMENT.—40 percent of any amount attributable to the adjustment under subsection (d)(5)(B) of such section.

“(iv) PERCENTAGE OF CAPITAL PAYMENTS.—67 percent of any amounts attributable to payments for capital-related costs under subsection (g) of such section.

“(C) PERIODIC PAYMENTS FROM MEDICARE TRUST FUNDS.—Payments under this subsection shall be made—

“(i) on a periodic basis consistent with the periodicity of payments under this title; and

“(ii) in appropriate part, as determined by the Secretary, from the trust funds.

“(D) ANNUAL LIMIT ON MEDICARE PAYMENTS.—The amount paid to the Department of Veterans Affairs under this subsection for any year for the demonstration project may not exceed \$50,000,000.

“(2) REDUCTION IN PAYMENT FOR VA FAILURE TO MAINTAIN EFFORT.—

“(A) IN GENERAL.—To avoid shifting onto the medicare program under this title costs previously assumed by the Department of Veterans Affairs for the provision of medicare-covered services to targeted medicare-eligible veterans, the payment amount under this subsection for the project for a fiscal year shall be reduced by the amount (if any) by which—

“(i) the amount of the VA effort level for targeted veterans (as defined in subparagraph (B)) for the fiscal year ending in such year, is less than

“(ii) the amount of the VA effort level for targeted veterans for fiscal year 1998.

“(B) VA EFFORT LEVEL FOR TARGETED VETERANS DEFINED.—For purposes of subparagraph (A), the term ‘VA effort level for targeted veterans’ means, for a fiscal year, the amount, as estimated by the administering Secretaries, that would have been expended under the medicare program under this title for VA-provided medicare-covered services for targeted veterans (as defined in subparagraph (C)) for that fiscal year if benefits were available under the medicare program for those services. Such amount does not include expenditures attributable to services for which reimbursement is made under the demonstration project.

“(C) VA-PROVIDED MEDICARE-COVERED SERVICES FOR TARGETED VETERANS.—For purposes

of subparagraph (B), the term ‘VA-provided medicare-covered services for targeted veterans’ means, for a fiscal year, items and services—

“(i) that are provided during the fiscal year by the Department of Veterans Affairs to targeted medicare-eligible veterans;

“(ii) that constitute hospital care and medical services under chapter 17 of title 38, United States Code; and

“(iii) for which benefits would be available under the medicare program under this title if they were provided other than by a Federal provider of services that does not charge for those services.

“(3) ASSURING NO INCREASE IN COST TO MEDICARE PROGRAM.—

“(A) MONITORING EFFECT OF DEMONSTRATION PROGRAM ON COSTS TO MEDICARE PROGRAM.—

“(i) IN GENERAL.—The Secretaries, in consultation with the Comptroller General, shall closely monitor the expenditures made under the medicare program for targeted medicare-eligible veterans during the period of the demonstration project compared to the expenditures that would have been made for such veterans during that period if the demonstration project had not been conducted.

“(ii) ANNUAL REPORT BY THE COMPTROLLER GENERAL.—Not later than December 31 of each year during which the demonstration project is conducted, the Comptroller General shall submit to the Secretaries and the appropriate committees of Congress a report on the extent, if any, to which the costs of the Secretary under the medicare program under this title increased during the preceding fiscal year as a result of the demonstration project.

“(B) REQUIRED RESPONSE IN CASE OF INCREASE IN COSTS.—

“(i) IN GENERAL.—If the administering Secretaries find, based on subparagraph (A), that the expenditures under the medicare program under this title increased (or are expected to increase) during a fiscal year because of the demonstration project, the administering Secretaries shall take such steps as may be needed—

“(I) to recoup for the medicare program the amount of such increase in expenditures; and

“(II) to prevent any such increase in the future.

“(ii) STEPS.—Such steps—

“(I) under clause (i)(I), shall include payment of the amount of such increased expenditures by the Secretary of Veterans Affairs from the current medical care appropriation of the Department of Veterans Affairs to the trust funds; and

“(II) under clause (i)(II), shall include suspending or terminating the demonstration project (in whole or in part) or lowering the amount of payment under paragraph (1)(A).

“(i) EVALUATION AND REPORTS.—

“(1) INDEPENDENT EVALUATION.—

“(A) IN GENERAL.—The administering Secretaries shall arrange for an independent entity with expertise in the evaluation of health care services to conduct an evaluation of the demonstration project.

“(B) CONTENTS.—The evaluation conducted under subparagraph (A) shall include an assessment, based on the agreement entered into under subsection (b), of the following:

“(i) The cost to the Department of Veterans Affairs of providing care to veterans under the project.

“(ii) Compliance of participating demonstration sites with applicable measures of

quality of care, compared to such compliance for other medicare-participating medical centers that are not Veterans Affairs medical facilities.

“(iii) A comparison of the costs of participation of the demonstration sites in the program with the reimbursements provided for services of such sites.

“(iv) Any savings or costs to the medicare program under this title from the project.

“(v) Any change in access to care or quality of care for targeted medicare-eligible veterans participating in the project.

“(vi) Any effect of the project on the access to care and quality of care for targeted medicare-eligible veterans not participating in the project and other veterans not participating in the project.

“(vii) The provision of services under managed health care plans under subsection (g), including the circumstances (if any) under which the Secretary of Veterans Affairs uses reserves described in paragraph (3) of such subsection and the Secretary of Veterans Affairs’ response to such circumstances (including the termination of managed health care plans requiring the use of such reserves).

“(viii) Any effect that the demonstration project has on the enrollment in Medicare+Choice plans offered by Medicare+Choice organizations under part C of this title in the established site areas.

“(ix) Any additional elements that the independent entity determines is appropriate to assess regarding the demonstration project.

“(C) ANNUAL REPORTS.—The independent entity conducting the evaluation under subparagraph (A) shall submit reports on such evaluation to the administering Secretaries and to the committees of jurisdiction in the Congress as follows:

“(i) INITIAL REPORT.—The entity shall submit the initial report not later than 12 months after the date on which the demonstration project begins operation.

“(ii) SECOND ANNUAL REPORT.—The entity shall submit the second annual report not later than 30 months after the date on which the demonstration project begins operation.

“(iii) FINAL REPORT.—The entity shall submit the final report not later than 3½ years after the date on which the demonstration project begins operation.

“(2) REPORT ON EXTENSION AND EXPANSION OF DEMONSTRATION PROJECT.—Not later than 3½ years after the date on which the demonstration project begins operation, the administering Secretaries shall submit to Congress a report containing—

“(A) their recommendation as to—

“(i) whether to extend the demonstration project or make the project permanent;

“(ii) whether to expand the project to cover additional demonstration sites and to increase the maximum amount of reimbursement (or the maximum amount of reimbursement permitted for managed health care plans under this section) under the project in any year; and

“(iii) whether the terms and conditions of the project should be continued (or modified) if the project is extended or expanded; and

“(B) a detailed description of any costs associated with their recommendation made pursuant to clauses (i) and (ii) of subparagraph (A).”.

WELLSTONE AMENDMENT NO. 27

Mr. WELLSTONE proposed an amendment to the bill, S. 4, supra; as follows:

On page 46, after line 16, add the following:

TITLE V—MISCELLANEOUS

SEC. 501. EXPANSION OF LIST OF DISEASES PRESUMED TO BE SERVICE-CONNECTED FOR RADIATION-EXPOSED VETERANS.

Section 1112(c)(2) of title 38, United States Code, is amended by adding at the end the following:

“(P) Lung cancer.

“(Q) Bone cancer.

“(R) Skin cancer.

“(S) Colon cancer.

“(T) Posterior subcapsular cataracts.

“(U) Non-malignant thyroid nodular disease.

“(V) Ovarian cancer.

“(W) Parathyroid adenoma.

“(X) Tumors of the brain and central nervous system.

“(Y) Rectal cancer.”.

COVERDELL (AND MCCAIN) AMENDMENT NO. 28

Mr. WARNER (for Mr. COVERDELL for himself, Mr. MCCAIN, and Mr. LEVIN) proposed an amendment to the bill, S. 4, supra; as follows:

On page 28, between lines 8 and 9, insert the following:

SEC. 104. SENSE OF THE SENATE REGARDING USE OF EXTENSION OF TIME TO FILE TAX RETURNS FOR MEMBERS OF UNIFORMED SERVICES ON DUTY ABROAD.

(a) FINDINGS.—The Senate finds that—

(1) the Internal Revenue Service provides a 2-month extension of the deadline for filing tax returns for members of the uniformed services who are in an area outside the United States or the Commonwealth of Puerto Rico for a tour of duty which includes the date for filing tax returns;

(2) any taxpayer using this 2-month extension who owes additional tax must pay the tax on or before the regular filing deadline;

(3) those who use the 2-month extension and wait to pay the additional tax at the time of filing are charged interest from the regular filing deadline, and may also be required to pay a penalty; and

(4) it is fundamentally unfair to members of the uniformed services who make use of this extension to require them to pay penalties and interest on the additional tax owed.

(b) SENSE OF THE SENATE.—It is the sense of the Senate that—

(1) the 2-month extension of the deadline for filing tax returns for certain members of the uniformed services provided in Internal Revenue Service regulations should be codified; and

(2) eligible members of the uniformed services should be able to make use of the extension without accumulating interest or penalties.

GRAHAM AMENDMENT NO. 29

Mr. GRAHAM proposed an amendment to the bill, S. 4, supra; as follows:

At the end add the following:

TITLE V—REVENUES

SEC. 501. EXTENSION OF HAZARDOUS SUBSTANCE SUPERFUND TAXES.

(a) EXTENSION OF TAXES.—

(1) ENVIRONMENTAL TAX.—Section 59A(e) of the Internal Revenue Code of 1986 is amended to read as follows:

“(e) APPLICATION OF TAX.—The tax imposed by this section shall apply to taxable years

beginning after December 31, 1986, and before January 1, 1996, and to taxable years beginning after June 30, 1999.”

(2) EXCISE TAXES.—Section 4611(e) of such Code is amended to read as follows:

“(e) APPLICATION OF HAZARDOUS SUBSTANCE SUPERFUND FINANCING RATE.—The Hazardous Substance Superfund financing rate under this section shall apply after December 31, 1986, and before January 1, 1996, and after June 30, 1999.”

(b) EFFECTIVE DATES.—

(1) INCOME TAX.—The amendment made by subsection (a)(1) shall apply to taxable years beginning after June 30, 1999.

(2) EXCISE TAX.—The amendment made by subsection (a)(2) shall take effect on July 1, 1999.

SEC. 502. MODIFICATION TO FOREIGN TAX CREDIT CARRYBACK AND CARRYOVER PERIODS.

(a) IN GENERAL.—Section 904(c) of the Internal Revenue Code of 1986 (relating to limitation on credit) is amended—

(1) by striking “in the second preceding taxable year,” and

(2) by striking “or fifth” and inserting “fifth, sixth, or seventh”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall apply to credits arising in taxable years beginning after December 31, 1998.

SEC. 503. EXTENSION OF OIL SPILL LIABILITY TAXES.

(a) IN GENERAL.—Section 4611(f)(1) (relating to application of oil spill liability trust fund financing rate) is amended by striking “after December 31, 1989, and before January 1, 1995” and inserting “after the date of the enactment of the Soldiers’, Sailors’, Airmen’s, and Marines’ Bill of Rights Act of 1999 and before October 1, 2008”.

(b) INCREASE IN UNOBLIGATED BALANCE WHICH ENDS TAX.—Section 4611(f)(2) (relating to no tax if unobligated balance in fund exceeds \$1,000,000,000) is amended by striking “\$1,000,000,000” each place it appears in the text and heading thereof and inserting “\$5,000,000,000”.

(c) EFFECTIVE DATE.—The amendments made by this section shall take effect on the date of the enactment of this Act.

AUTHORITY FOR COMMITTEES TO MEET

COMMITTEE ON AGRICULTURE, NUTRITION, AND FORESTRY

Mr. WARNER. Mr. President, I ask unanimous consent that the Committee on Agriculture, Nutrition, and Forestry be allowed to meet during the session of the Senate on Wednesday, February 24, 1999. The purpose of this meeting will be for oversight of the U.S. Department of Agriculture.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON ARMED SERVICES

Mr. WARNER. Mr. President, I ask unanimous consent that the Strategic Subcommittee of the Committee on Armed Services be authorized to meet on Wednesday, February 24, 1999, at 2:00 p.m. in open session, to receive testimony on National Missile Defense Programs and Policies, in Review of the Defense Authorization Request for Fiscal Year 2000 and the Future Years Defense Program.